

**CITY OF EL PASO, TEXAS  
AGENDA ITEM  
DEPARTMENT HEAD'S SUMMARY FORM**

**AGENDA DATE:** January 04, 2022

**PUBLIC HEARING DATE:** N/A

**CONTACT PERSON(S) NAME AND PHONE NUMBER:** Maria O. Pasillas, (915) 212-1737

**DISTRICT(S) AFFECTED:** All

**STRATEGIC GOAL:** Goal 6 – Set the Standard for Sound Governance and Fiscal Management

**SUBGOAL:** 6.11 Provide efficient and effective services to taxpayers

**SUBJECT:**

**APPROVE** a resolution / ordinance / lease to do what? **OR AUTHORIZE** the City Manager to do what? Be descriptive of what we want Council to approve. Include \$ amount if applicable.

*Tax Refund to TK Elevator Corporation, in the amount of \$3,996.77 made an overpayment on November 16, 2021 of 2021 taxes. (Geo. # 0242-999-3003-0000). This action would allow us to comply with state law which requires approval by the legislative body of refunds of tax overpayments greater than \$2,500.00.*

**BACKGROUND / DISCUSSION:**

Discussion of the what, why, where, when, and how to enable Council to have reasonably complete description of the contemplated action. This should include attachment of bid tabulation, or ordinance or resolution if appropriate. What are the benefits to the City of this action? What are the citizen concerns?

Approve property tax overpayment refunds greater than \$2,500.00, per the Texas Property Tax Code, Sec. 31.11 – Refunds of Overpayments or Erroneous Payments.

**PRIOR COUNCIL ACTION:**

**Has the Council previously considered this item or a closely related one?**

Council has considered this previously on a routine basis.

**AMOUNT AND SOURCE OF FUNDING:**

How will this item be funded? Has the item been budgeted? If so, identify funding source by account numbers and description of account. Does it require a budget transfer?

**HAVE ALL AFFECTED DEPARTMENTS BEEN NOTIFIED?  YES  NO**

**PRIMARY DEPARTMENT:** Tax Office

**SECONDARY DEPARTMENT:** N/A

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\*\*\*\*\*REQUIRED AUTHORIZATION\*\*\*\*\*

**DEPARTMENT HEAD:**

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**(If Department Head Summary Form is initiated by Purchasing, client department should sign also)**

TAX REFUNDS  
January 4, 2022

1. TK Elevator Corporation, in the amount of \$3,996.77 made an overpayment on November 16, 2021 of 2021 taxes.  
(Geo. # 0242-999-3003-0000)

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Laura D. Prine  
City Clerk



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Maria O. Pasillas, RTA  
Tax Assessor Collector



MARIA O. PASILLAS, RTA  
 CITY OF EL PASO TAX ASSESSOR COLLECTOR  
 221 N. KANSAS, STE 300  
 EL PASO, TX 79901

PH: (915) 212-0106 FAX: (915) 212-0107 www.elpasotexas.gov/tax-office

TAX OFFICE  
 RECEIVED

DEC 06 2021

TK ELEVATOR CORPORATION  
 788 CIRCLE 75 PARKWAY SE, STE.  
 ATLANTA, GA 30339

Geo No. 0242-999-3003-0000	Prop ID 418420
Legal Description of the Property CMP INV OFFICE EQUIPMENT MACH - LEASED VEH	
1477 LOMALAND DR-D1	
OWNER: THYSSENKRUPP USA INC.	

2021 OVERAGE AMOUNT \$3,996.77

1: CITY OF EL PASO, 5: YSLETA ISD, 6: COUNTY OF EL PASO, 7: EL PASO COMMUNITY COLLEGE, 8: UNIVERSITY MEDICAL CENTER OF EL PASO

Dear Taxpayer:

Our records indicate that an overpayment exists on the property tax account listed above as of the date of this letter. If you paid the taxes on this account and believe you are entitled to a refund, please complete the application below, sign it, and return it to our office. If the taxes were paid by your mortgage/title company or any other party, you must obtain a written letter of release in order for the refund to be issued in your name. If you did not make the payment(s) on this account, please forward this letter to the person who paid these taxes. You may also request the transfer of this overpayment to other tax accounts and/or tax years in the space provided or by attaching an additional sheet if necessary. Your application for refund must be submitted within three years from the date of the overpayment, or you waive the right to the refund (Sec. 31.11c). Governing body approval is required for refunds in excess of \$2500.

APPLICATION FOR PROPERTY TAX REFUND: This application must be completed, signed, and submitted with supporting documentation to be valid.

Step 1. Identify the refund recipient. Show information for whomever will be receiving the refund.	Who should the refund be issued to:			
	Name: TK Elevator Corporation			
	Address: 788 Circle 75 Parkway SE, Ste.500			
	City, State, Zip: Atlanta, GA 30339			
Daytime Phone No.: 770-799-0492		E-Mail Address: cynthia.mallard@tkelevator.com		
Step 2. Provide payment information. Please attach copy of cancelled check, original receipt, online payment confirmation or bank/credit card statement.	Payment made by: Check No Date Paid Amount Paid			
	TK Elevator Corporation	E-CHECK	11/17/2021	\$3,996.77
	TK Elevator Corporation	E-CHECK	11/17/2021	\$3,996.77
	TOTAL AMOUNT PAID (sum of the above amounts)			\$7,993.54
Step 3. Provide reason for this refund. Please list any accounts and/or years that you intended to pay with this overage.	Please check one of the following:			
	<input checked="" type="checkbox"/>	I paid this account in error and I am entitled to the refund.		
	<input type="checkbox"/>	I overpaid this account. Please refund the excess to the address listed in Step 1.		
	<input type="checkbox"/>	I want this payment applied to next year's taxes.		
This payment should have been applied to other tax account(s) and/or year(s), escrow (listed below):				
Step 4. Sign the form. Unsigned applications cannot be processed.	By signing below, I hereby apply for the refund of the above-described taxes and certify that the information I have given on this form is true and correct. ( If you make a false statement on this application, you could be found guilty of a Class A misdemeanor or a state jail felony under the Texas Penal Code, Sec. 37.10. )			
	SIGNATURE OF REQUESTOR (REQUIRED)		PRINTED NAME & DATE	
	Cynthia Mallard		Cynthia Mallard	
TAX OFFICE USE ONLY: <input checked="" type="checkbox"/> Approved <input type="checkbox"/> Denied By: NIS Date: 12-9-21				

Notes

Go To :

LUZR  
ACT80122 v1.90

12/10/2021 14:34:49  
ACTEP

DEPOSIT Remittance Detail

Summary Query

Summary

Deposit No. Account No. Remit Seq No. Check No. Payment Amount Payment Agreement No.  
 EC01091468 024299930030000

Check/Receipt Images	Deposit No.	Receipt Date	Remit Seq No.	Check No.	Payment Type	Payment Amount	Applied Amount	Transaction Type	Account No.	Payer
	EC11162198	11/16/2021	48105770	CC003922654	EC	\$3,996.77	\$3,996.77	LG	024299930030000	30141732-TK ELEVATOR
	RC211209	11/16/2021	48105770	CC003922654	EC	\$3,996.77	\$3,996.77	TR	024299930030000	30141732-TK ELEVATOR
	RC211209	11/16/2021	48105770	CC003922654	EC	\$3,996.77	\$3,996.77	TR	024299930030000	30241346-TK ELEVATOR
	EC11162198	11/15/2021	48105629	CC003920988	EC	\$3,996.77	\$3,996.77	PA	024299930030000	30141590-TK ELEVATOR
	EC03032185	03/03/2021	47031842	CC003654239	EC	\$1,343.31	\$1,343.31	PA	024299930030000	29602477-THYSSENKRUF
	EC01032098	01/03/2020	42642942	CC002735652	EC	\$578.67	\$578.67	PA	024299930030000	27853475-THYSSENKRUF
	EC01221998	01/21/2019	40084274	CC002288944	EC	\$1,804.24	\$1,804.24	PA	024299930030000	26963644-THYSSENKRUF
	EC01251898	01/25/2018	37289421	CC001876851	EC	\$1,990.88	\$1,990.88	PA	024299930030000	26075099-THYSSENKRUF
	EC01271798	01/27/2017	34417634	CC001523021	EC	\$868.63	\$868.63	PA	024299930030000	25218347-THYSSENKRUF
	EC12281568	12/28/2015	30488545	CC001141511	EC	\$823.22	\$823.22	PA	024299930030000	24199044-THYSSENKRUF
	EC11241468	11/21/2014	27032429	CC000873273	CH	\$949.78	\$949.78	PA	024299930030000	23412228-THYSSENKRUF
	EC01091468	01/08/2014	24951203	CC000724896	CH	\$786.34	\$786.34	PA	024299930030000	22883580-THYSSENKRUF

Applied Total \$45,946.26